Madrid International Plan of Action on Ageing and Regional Implementation Strategy
Report on the follow-up to the Regional Implementation
Strategy of the Madrid International Plan of Action on
Ageing in Estonia
Agenig in Esterna

Tabel of Contents

3
3
4
5
6
6
7
7
7
9
11
13
15
17

Part I

Executive summary

The Ministry of Social Affairs draw up the following report based on relevant studies and analyses, programs and policy documents. The input was applied from other ministries (Ministry of Economic Affairs and Communications, Ministry of Interior, Ministry of Justice, Ministry of Culture, Ministry of Finance and Ministry of Education and Research), with the request to involve other representatives in the preparation process of the following report.

A prepared questionnaire with guidelines was sent to all county governments in Estonia, with the request to collect information from municipalities. Thus, the feedback was given by 13 counties of 15 (Ida-Viru county, Lääne-Viru county, Harju county, Pärnu county, Põlva county, Tartu county, Lääne county, Viljandi county, Jõgeva county, Valga county, Võru county, Saaremaa and Hiiumaa). The input for the report was not received from Järva county and Rapla county. However, received information from other counties still gives an overall overview of the current situation on local level.

In order to involve in to the preparation process other experts, organisations and NGO-s, The Ministry of Social Affairs applied input by Older People Policy Committee (15 member organisations), but the feedback to this report was given by four organisations only.

Three or five major achievements since 2012:

- **1.** The reconstruction and modernization of the infrastructure of nursing services. The measure has improved the quality and availability of nursing services (home nursing and inpatient nursing care). In 2012, 6497 people received home nursing, in 2015, the number was 8060. During the same reference period there was 25% more home visits and the number of treatment cases has increased 11% mainly at the expense of home nursing.
- 2. As of 2011, employment in Estonia has been on a constant increase and unemployment on a constant decline with the employment indicators for older people being one of the best in the EU. One of the factors contributing to the high employment rate of older people has been a flexible pension system. But also several measures for facilitating employment have been taken as of 2007 with the resources of the European Social Fund. As of 2015, persons of pensionable age can also use a wide variety of labour market services through the Estonian Unemployment Insurance Fund. To support employment, the activities started during previous European Social Fund (ESF) periods are continued.
- **3.** In 2016, **work ability reform** entered into force. The aim of the reform is **to provide employment for people with decreased work ability and to keep them in employment** to ensure income and independence for people with a health damage, as well as to provide them with an opportunity to put themselves in practise and participate in social life. For that, a new evaluation system for work ability have been implemented the evaluation of work ability shall identify the person's work ability and their operating limitations which shall help identify a suitable job, working conditions, and necessary services.

4. In 2016, the new <u>Social Welfare Act</u> entered into force. It explained in more detail the duties of a local government in providing assistance and organising social services. To unify the quality of services organised by local governments, first time the minimum requirements were established for nine social services (§ 17-§ 25 and § 27-§ 44).

An important aspects to be improved in the future:

- 1. Considering the ageing population, the need for long-term care will deepen, and the increasing care burden and need can be considered a new security risk. Therefore finding solutions to the care burden of the families is mandatory. Same time the availability and quality of social services, also funding principles has to be improved.
- 2. The employment rate that is declining with age and the problems of **older unemployed people in finding new employment continues to be a challenge.** The obstacles include qualification which does not correspond to the changing demands of the labour market, health problems, reduced work ability, greater risk of occupational accidents, lack of flexible work options, as well as prejudice and possible unequal treatment by employers. Employers regard older people as less productive or as having a higher risk of missing work due to health problems.
- **3.** Key challenge is **to ensure the financial sustainability of the Social Security System**. The payment schemes for benefits (including pensions) and grants has to be established on the basis of a principle, according to which the payments shall be simultaneously activating, adequate, and financially sustainable.
- **4.** An important challenge is also **the use of community resources in preventing and reducing social exclusion**, and to increase older peoples' involvement in voluntary activities.

Conclusions

Aspects relating to ageing society continue to be politically important in Estonia. Estonia has recently implemented a number of important reforms, the impact of which can be assessed sometime after. But the progress within years 2012-2016 is especially seen in employment domain. It can also be considered a significant achievement that in addition to traditional social protection, increasing people's self-sufficiency and their social and professional activity has become more and more important.

While there is more challenges than the achievements, promising targets have set in several new development plans. The ongoing reforms play significant role in improving the quality of the peoples' life through whole life course. Therefore key challenges are also related with the pressure for the sustainability of public finances as the public finances will not be achieved to a sustainable basis without new policy measures.

General Information

1. Country name: Republic of Estonia

2. Name and contact details of the authors of the report:

Ketri Kupper	Heidi Koolmeister
Executive Officer, Welfare Department	Adviser, Welfare Department
Ministry of Social Affairs	Ministry of Social Affairs
Gonsiori 29, 15027 Tallinn, Estonia	Gonsiori 29, 15027 Tallinn, Estonia
Phone: +372 626 9193	Phone: none
E-post: <u>ketri.kupper@sm.ee</u>	E-post: none

3. Name and contact details of official national focal point on ageing:

Ketri Kupper, e-post: ketri.kupper@sm.ee, tel +372 626 9193

4. Name, reference, and date of adoption or status of preparation of national strategy, action plan or similar policy document on ageing.

Name of relevant policy document	Date of adoption
The National Health Plan 2009-2020	20.12.2012
The Life Long Learning Strategy 2020	13.02.2014
Action Programme of the Government Coalition 2015-2019	29.05.2015
Welfare Development Plan 2016-2023	30.03.2016
Other relevant policy documents used in the report:	
Information Society Development Plan 2020*	18.11.2013
Estonia 2020	08.05.2014
Estonian Civil Society Development Plan 2015-2020*	19.02.2015
Estonia's E-health Strategy 2020*	15.12.2015

^{*}Available in Estonian only

National ageing situation

Estonia is a country with an ageing and declining population. According to Statistics Estonia, 1,315,944 people lived in Estonia at the beginning of 2016. According to the calculation, the Estonian population will decline to 1.19 million people by 2040, whereas the percentage of older people (50+) in the population is evaluated to rise to 48.4%. The percentage of people aged 65 and older (hereinafter "people of pensionable age")¹ in the population has increased to 19% during the period of 1991–2016 (Drawing 1).

Life expectancy at birth has extended; in 2014 the average was 77.2 years (<u>Drawing 2</u>). The expectancy of healthy life years has also extended in the longer perspective; in 2015, the average was 54.8 years (<u>Drawing 3</u>).

The level of the economy and the quality of life of older people can be indirectly characterised by the GDP. The Estonian GDP per capita in current prices was 15,564 euros in 2015. The real Estonian GDP per capita displayed a cumulative growth of 33% over the years 2004–2015 (Table 1). The social protection expenditure in Estonia made up 15% of the GDP in 2013 (Table 2). In this aspect, Estonia shares the last place with Latvia in comparison with other EU Member States.

The old age dependency ratio has constantly increased since 1988; in 2012, there were 27 people of pensionable age for every 100 people of working age. That figure was 29 in 2016. However, the employment of older people is relatively high in Estonia in comparison with other EU states – 64.5% in Estonia (Table 3) with the EU's average being 53.3%. In recent years, the situation of people (aged 55–64 years) on the labour market has improved. The fastest increase in employment has occurred among the age group of 60–64 years. 54.3% of people (60–64 years) were employed when reaching pensionable age. In 2015, 29.2% of people (aged 65–69 years), and 13.1% of (aged 70–74 years) were employed.

The economic situation of older people is worse in comparison with the working population, as their income mainly depends on the pension. In 2015, the average pension was 322 euros per month and the average old-age pension 365.60 euros per month. The relative poverty of people receiving old-age pension has increased in comparison with 2012. While 32% of people receiving old-age pension lived in relative poverty in 2013, the indicator was 36% in 2014 (Drawing 4).

Regionally, the state is divided into 15 counties, which are divided into 213 municipalities, a third of the population lives in Harju County. While 85% of people aged 65 and older live in a city and 15% in rural areas in Harju County, then the percentages are reversed in Põlva County in South-Estonia with 15% of people aged 65 and older living in cities and 85% in rural areas² (Drawing 5).

To improve administrative management, the state is about to implement an administrative reform with the purpose of creating more competitive administrative units (with at least 5,000 residents) and thereby improving the availability and quality of public services.

Method

Political impact can be assessed through studies and goals defined in development plans. Thus, the present report uses quantitative data obtained from Statistics Estonia and the Department of Analysis and Statistics of the Ministry of Social Affairs.

In addition, the data used from the following studies: Estonian Social Survey (2013), Volunteering in Estonia (2013-2014), Health Behaviour among Estonian Adult Population (2014), The coping of older people and the elderly (2015), Estonian Labour Force Survey (2015), as well the strategic documents approved by the

6

¹ Pensionable age is the age when a person attains the right to receive old-age pension. In general, it is a person who has turned 63 and has at least 15 years of pension qualifying period in Estonia. In 2010, Riigikogu approved the amendment of the State Pension Insurance Act and an act to amend other related acts, which established 65 as the general pensionable age. For a gradual equalising of the pensionable age of men and women, women currently attain the right to receive old-age pension before the age of 63 (e.g. at the age of 62 for women born in 1951). As of 1 January 2017, a transition period for people born in 1954–1960 is established where the pensionable age will grow gradually by 3 months for every succeeding birth year, reaching the age of 65 years by 2026.

² Development Plan for Active Ageing 2013–2020

Government. Unfortunately, it was not possible to make references to the English versions. Therefore, reference where available, is made to English versions and the sources in Estonian language only, are marked accordingly in the report.

Qualitative data was collected by questionnaires which were distributed to other ministries, all county governments and the other partners via Older People's Policy Committee.

Part II

1. National Actions and progress in implementation of MIPAA/RIS

Longer working life is encouraged and ability to work is and maintained

As of 2011, employment in Estonia has been on a constant increase and unemployment on a constant decline with the employment indicators for older people being one of the best in the EU³.

One of the factors contributing to the high employment rate of older people has been a flexible pension system. As the average old-age pension is low in comparison with the average wages⁴, then the employment of the people in retirement age⁵ has been facilitated by the fact that a working pensioner is also entitled to state pension⁶. Pensioners also have a right to an additional income tax incentive, the rate of which has been increased every year as of 2014 (2,304 euros per year in 2011–2013, and 2,700 euros in 2016). Hence, in addition to the general tax-free income⁷, working pensioners have a right to tax-free income in the amount of 4,740 euros per year, i.e. 395 euros per month.

It is important to note that no changes were implemented in the pension system in 2012–2015.⁸ This year, within the framework of the 2015–2019 Action Programme of the Government Coalition, the Ministry of Social Affairs and the Ministry of Finance analysed the grounds for calculating state pensions and the impact of the pensionable age on the sustainability of the pension system (therein, implementing a flexible pensionable age and a higher increase of the base amount of the pension was considered). The analysis indicated that in order to ensure the sustainability of the pension system, the pensionable age should be increased as of 2027, flexible retirement options should be implemented, and the pension formula, which is increasingly dependent on the size of income, should be reviewed.

Several measures for facilitating employment have been taken as of 2007 with the resources of the European Social Fund. The framework programme "Increasing qualified labour supply 2007–2013" focused on introducing flexible work formats and improving general employment; another objective was a more effective supply of

³ According to the Active Ageing Index (AAI), Estonia ranked second among EU Member States in employment indicators for older people in 2014 (1st place for the age group of 65–69 years)

⁴ In 2015, the average monthly gross wages in Estonia was 1,065 euros, the average retirement pension was 365.60 euros. Source: Statistics Estonia

⁵ 54.3% of people reaching pensionable age (among 60–64-year-olds) were employed in 2015 (44.8% in 2008), 29.2% of people aged 65–69 years, and 13.1% of people aged 70–74 years were employed. Source: Estonian Labour Force Survey. Statistics Estonia

⁶ Until 2000, the State Allowance Act was valid in the Republic of Estonia. This act set limitations for the payment of pensions to employed persons. The limitations were abolished with section 46 on 1 September 1996. Section 43 of the State Pension Insurance Act, which entered into force on 1 January 2002, sets partial limitations for the payment of pensions to employed persons https://www.riigiteataja.ee/en/eli/528062016001/consolide

⁷ Income Tax Act, entry into force 1 January 2000, sections 23 and 23² https://www.riigiteataja.ee/en/eli/513062016009/consolide

⁸ According to subsection 26 (8) and section 61^s of the State Pension Insurance Act https://www.riigiteataja.ee/en/eli/528062016001/consolide, the Government of the Republic analyses the bases for calculating state pensions and the impact of the pensionable age on the financial and social sustainability of the pension insurance system to make proposals for changes, if necessary. No amendment proposals were submitted to Riigikogu on the basis of the latest analysis conducted in 2012, the deadline for the next analysis is 2017.

measures supporting the entry of the unemployed and persons seeking work into the labour market, including the development of measures that support the work ability of older people and their participation in the labour market. An information campaign directed at older people and employers has been carried out, proposals for developing services and policies aimed at older people have been formulated. Workshops intended for older people were organised with a total of 148 participants (83 in Estonian and 65 in Russian). The workshops introduced work seeking options and the individual work seeking plan, as well as made recommendations for preparing application documents and getting ready for job interviews.

The objective of the programme "Welfare measures supporting employment 2012–2013" was to increase the employment of people who have problems with coping or have special needs. 8,394 people participated in the programme, 13.5% of whom were older (77% of which were women). Although the target group of the programme was designated through the problem rather than age, we hereby list the most important activities:

The Centre of Environmental Adaptation and Assistive Technology for counselling legal and natural persons on the adaptation of workplaces and homes has been launched. The need for the services offered by the centre was pressing, as Estonia did not have such a service before. In 2012–2015, counselling services were provided to 1,580 customers and 101 institutions. Additionally, training courses on assistive technology were organised for family doctors and specialist doctors. The development of these services created the prerequisites for increasing the employment of persons with disabilities and supported the work ability reform, which took effect in 2016, and the changes in the system of assistive technology.

A pilot project was launched with the aim of offering needs-based services through a case-based approach for persons with multiple problems whose inability to cope is mainly caused by social and family problems, debt, economic difficulties, unemployment, insufficient professional skills, low educational level, poor social skills, health problems, caretaking burden, or addiction problems. By this project, 4,029 people were referred to services (91% of the people who participated in the project), including 19% of older people. 13.2% of all the people who received services through the project found employment, 35.7% of whom maintained employment.

To support employment, the activities started during previous European Social Fund (ESF) periods are continued. An increased amount of resources is to be referred to local governments for developing and organising welfare services that support employment (including personal assistant, support person, day care, temporary care, and home care services) for elderly and disabled people in order to support the participation of people with a caretaking burden in the labour market. 10,100 adult persons are planned as the target level of service recipients.

As of 2015, persons of pensionable age can also use a wide variety of labour market services through the Estonian Unemployment Insurance Fund, supported by the ESF: labour market training, support for attaining qualification, practical training, support for starting entrepreneurship, adaptation of workspace and work equipment, free use of assistive technology necessary for working. In parallel, motivating services are offered to the employer: wage subsidy, reimbursement of training costs, practical training, workplace adaptation, etc.

On 1 January 2016, a <u>work ability reform</u> for ensuring social and economic sustainability in the conditions of a declining working age population and an ageing population was launched in Estonia to create a new system that supports work ability. The aim of the reform is to change attitudes towards people with reduced work ability, help them seek and maintain employment, and improve their ability to cope with daily life, considering the personal abilities and needs of each person.

The implemented measures can be evaluated as successful. However, the employment rate that is declining with age and the problems of older unemployed people in finding new employment continues to be a challenge.

Attempts are made to resolve the challenges described above within the framework of the Estonia 2020 strategy, the Welfare Development Plan 2016–2023, as well as the Estonian Lifelong Learning Strategy 2020 (LLS). At the beginning of 2015, an adult education programme 2015–2018 planned in the LLS for the execution of activities and goals aimed at adults was approved with the purpose of motivating adults to learn and create high-quality and flexible learning opportunities that support the development needs of the labour market. The programme sets out to improve the professional competence and/or key competencies of at least 73,500 adults.

The ESF's programme "Enhancing Digital Literacy Skills" 2014–2023 is the main instrument for fulfilling the goals related to ICT-skills as set forth in the Information Society Development Plan 2020 (available in Estonian only). One of the target groups of the programme are non-users of computers and the Internet⁹; the programme activities focusing on this target group will be launched in 2017. The purpose of the programme called E-community is to enforce community movements and create a so-called network of digital advisors who would help those community members (including the elderly) with insufficient computer and Internet skills.

Additionally, the <u>Action Programme of the Government Coalition 2015–2019</u> foresees for 2017 the planning of measures which extend the in-service training and retraining opportunities for employed persons provided through the Estonian Unemployment Insurance Fund. Thereby, special attention is paid to the in-service training of older people.

Participation, non-discrimination and social inclusion of older persons

A major issue in Estonia is that the social protection provided in the case of job loss and unemployment often does not prevent the person from falling into poverty. A comparison of population groups shows that, both absolute and relative poverty pose more of a threat for women, disabled people, and the unemployed. The risk of relative poverty for people aged 65 and older as a whole is significantly higher in comparison with the whole population, but the percentage of older people living in absolute poverty (2.2%) is smaller in comparison with the age group of 18–64 years (9.1%).¹⁰

A minimum income is provided in Estonia by means of subsistence benefits¹¹, local governments also pay additional social benefits. The state covers social risks with the national social security and pays social benefits to compensate for additional expenses related to disability. At the same time, the existing social security benefits, national benefits, and benefits paid by local governments are not always sufficient to ensure that people are able to cope financially and to prevent poverty.

To alleviate the abovementioned problems, the <u>Action Programme of the Government Coalition 2015–2019</u> focuses on measures that facilitate increasing productivity, improving the qualification of the labour force, increasing employment, and reducing the regional and gender pay gap. Several activities are executed within the framework of the <u>Welfare Development Plan 2016–2023</u>.

As pensioners living alone are one of the largest risk groups, a supplementary support scheme shall take effect as of 2017 with the purpose of improving the financial independence of old age pensioners living alone.

Lifelong learning and the self-improvement of older people support the social and professional activity of older people. As of 2014, the Estonian Lifelong Learning Strategy 2020 is the framework document that guides the developments in the field of education and aims to increase the study motivation among adults, ensure access to in-service training, and increase participation in lifelong learning.

In 2015, the new <u>Adult Education Act</u> entered into force with the purpose of increasing the transparency of the activity of in-service training institutions and improve the availability of high-quality adult education.

Participation in lifelong learning is also supported by the Seniors University Programme of the University of Tartu, which began its activity in 2009 in Tartu, Pärnu, Kuressaare and Türi. By today, the activities have extended to other regions. While 297 seniors graduated from the university in the academic year of 2009/2010, then the number was 1,541 in 2015. There are also several other universities (Tallinn University etc) who conduct programmes for older people.

-

 $^{^{9}}$ The percentage of non-users of the Internet among Estonian residents aged 16–74 years: base level: 18% (2013) → target level: 5% (2020), 2015 level: 11.6%

¹⁰ Data from 2013. Statistics Estonia, Estonian Social Survey

¹¹ A family or a person living alone is entitled to the subsistence benefit when their monthly income remains below the subsistence level after the deduction of fixed housing expenses as set forth by the Social Welfare Act. The subsistence level for the first family member was 76.70 euros in 2011 and 130 euros in 2016.

To promote political inclusion, Estonia publishes all draft acts and the related state documents in an information system for draft acts with the purpose of enabling public access. It is required to prepare an impact analysis, including the impact on disabled people and equal opportunities, for all legal acts. In preparing policies and legal acts, civil society organisations are regularly consulted.

An Older People Policy Committee has been active within the Ministry of Social Affairs as of 1997 for contributing to important decision-making processes. The committee is made up by members of the organisations protecting the rights and interests of older people, as well as representatives of healthcare and welfare service providers. The aim of the committee is to mediate between the state and the organisations protecting the rights of older people, as well as to counsel policymakers in issues regarding the older people. The committee also issues a newspaper titled "Elukaar".

The <u>e-election</u> option, which allows voting on the Internet and from a distance, facilitates participation in political life on equal grounds. Electronic voting with binding results has been used in Estonia since 2005. At the most recent parliamentary elections in 2015, 32% of votes were given online from 116 countries around the world.

Policies of the cultural sphere also facilitate the social activity and inclusion of older people. Every year, the Ministry of Culture announces a competition for the citizen of the year. The competition honours people who have stood out as an active and caring member of the Estonian society. In 2012, the motto of the Citizen's Day was "A dignified life". Pensioners have the opportunity to attend cultural and sports events, as well as visit museums, theatres for a discount.

To reduce inequality in the society, Estonia has created the institution of the <u>Gender Equality and Equal Treatment Commissioner</u> to help people protect their rights and prevent discrimination of any kind. The commissioner advocates for women, men, and representatives of different minority groups to have equal rights and opportunities in every sphere of social life. The Equal Treatment Act is valid in Estonia as of 2009 with the purpose of ensuring people protection against discrimination, including on the basis of age or disability.

In 2011, Estonia ratified the Convention on the International Protection of Adults, which offers protection for adults who cannot advocate for their own interests because of limitations to their personal abilities. A draft is under preparation, which extends the availability of legal assistance to people whose income does not allow receiving legal assistance in the market conditions.

Good prerequisites for the protection and improvement of the rights of disabled people have been created by the UN's Convention on the Rights of Persons with Disabilities, which was ratified by Estonia in 2012. The Government of the Republic and organisations representing people with disabilities have signed a Memorandum of Cooperation Principles with the purpose of valuing the civil society and improving the social integration of disabled people.

To improve access to transportation, the state has consistently invested in the renewal of the rolling stock and infrastructure. In 2011 and 2012, 110 buses corresponding to the needs of people with reduced mobility were bought, 88 of which service county bus lines and 22 city bus lines. The requirements of accessibility are considered to a limited extent in public transportation procurements in counties, but in many cases, local governments have not yet established such requirements.

To ensure a comprehensive approach to the improvement of accessibility, an Accessibility Council was established in 2015 with the task of leading the public discussion on accessibility and universal design in order to raise public awareness and introduce the principles of an inclusive living environment.

<u>Welcoming programmes</u> are carried out to ensure the integration of immigrants into the society. In 2015, an amendment to the <u>Citizenship Act</u> entered into force. It simplified the application procedure for citizenship for people aged 65 years (and older). An interactive Russian-language module of the legal assistance portal <u>www.juristaitab.ee</u> was launched in 2014 and 52 Estonian legal acts were translated into Russian.

Through activity and project supports, the Integration and Migration Foundation "Our People" supports the associations of national minorities, which include high numbers of older people.

Estonia organises regular target group surveys to monitor the situation of older people and their opportunities to participate in the economic, social, cultural, and political life. The Ministry of Social Affairs regularly commissions surveys on the coping of older people and the elderly with the purpose of measuring the activity and coping of Estonian residents aged 50 and older, as well as to be better acquainted with the target group of elderly people.

Starting from the fourth wave, Estonia also joined the Survey of Health Ageing and Retirement in Europe (SHARE) with internationally comparable results. The survey collects information on the health, social and economic state and changes of older people and investigates the connections between health, economic status, and social exclusion.

Additionally, the status of people with disabilities and a caretaking burden is regularly surveyed (in 2005, 2009, 2017) with older age groups included.

Dignity, health and independence in older age are promoted and safeguarded

The Estonian healthcare system is based on health insurance provided in accordance with the solidarity principle. 94.3% of the Estonian population was health insured at the end of 2015, the percentage has remained at the same level for years (94% in 2011). The availability of emergency care is guaranteed for uninsured persons. Therefore, most of the population has access to healthcare services.

The National Health Plan 2009–2020 directs developments in healthcare policies and has a general objective of extending the number of healthy life years. The more specific aims focus on supporting people's mental health, developing a health-supporting living and work environment, as well as reducing health risks induced by the environment. The objectives also include increasing the physical activity of the population, improving eating habits, preventing injury, and developing the healthcare system.

The state has implemented the following measures in 2012–2016 for improving and protecting the health of older people:

The infrastructure of nursing and care services has been developed with the aim of improving their quality and availability. In 2012–2015, the funding of nursing care services has increased by approximately 40%. By the end of 2014, the facilities of hospitals and other establishments offering nursing services were reconstructed with the help of the European Regional Fund's resources to the extent of 1,201 beds in total. In 2014, amendments to the Health Services Organisation Act entered into force and the reference prices for stationary nursing services provided independently, as well as home nursing services were updated. The content and requirements for nursing services were articulated. As of 2013, care homes, regardless of their form of ownership, also have the opportunity of providing home nursing services, granted that they hold a relevant activity licence.

Regional health promotion has been supported in counties and municipalities through the <u>National Institute for Health Development</u>, therein guidelines for different fields have been prepared and specialists have been trained. While 49% of municipalities had a health profile at the beginning of 2012, then by 2015, as much as 69% had prepared them.

The Green Papers on alcohol policy and tobacco policy, which established the goals for Estonian alcohol and tobacco policy, were approved in 2014. It may be noted as a positive sign that according to the data from the survey on Health Behaviour among Estonian Adult Population (2014), the percentage of alcohol non-users has mainly increased among the 55–64-year-olds (11.5% in 2012 and 15.8% in 2014).

The highest death rate in Estonia is from malignant tumours¹², circulatory system diseases, and injuries. It is important to note that suicides of older people are a problematic aspect of death from injuries¹³. In 2013, a Task

¹³ The highest mortality coefficient among suicide committers was in the target group of people older than 80. In 2013, the highest number of suicides were committed by men aged 50–69. Deaths caused by falls and injuries from mechanical strength were also most

 $^{^{12}}$ The mortality of older people (50+) from malignant tumours has increased by 3.4% in 2015 in comparison with 2012 (coefficient per 100,000 residents in 2012 – 293.1 and in 2015 – 716.7). Source: Public Health Department of the Ministry of Social Affairs

Force was created to coordinate the policies for preventing injuries and death from injuries. The Task Force mapped the coverage of the field by preventive actions and developed recommendations for improving the situation. The actions to be carried out by 2020 are integrated into different strategic documents ¹⁴. In 2016, a survey on the profile of suicide committers is under preparation with the purpose of mapping the most significant risk factors and developing specific preventive actions on the basis thereof. At the same time, the competence of specialists in noticing depression and suicidal tendencies has to be increased. The prevention of falls is covered by primary care.

The ageing of the population and the increasing number of patients with chronic diseases increases the need for primary healthcare services. Considering this trend, the current healthcare system does not provide enough services and the services provided are not evenly available. To improve the situation, 35 healthcare centres across Estonia that offer primary healthcare are created or modernised with the resources of the European Regional Development Fund. These centres accommodate family doctors and family nurses, and mainly offer physiotherapy, home nursing, and social consultation services.

To use the resources of the healthcare, labour market, and social welfare systems more efficiently than so far, <u>Estonia's e-health strategy</u> (available in Estonian only) has been prepared with the aim of creating an effective network of different level e-health solutions and their main services by 2025. The development of e-services in Estonia is demonstrated by the development and use of e-ambulance, digital prescriptions, e-consultations between doctors, etc. Display of medical invoices to patients is offered in the patient portal.

Responsibility for the provision and organisation of social welfare services, including the financing, is distributed between different levels of public authorities in Estonia. Local governments are responsible for community-based services for the elderly and disabled people, as well as services supporting independent coping in home environment and a 24-hour general care service for the elderly. The state is responsible for the provision of assistive technology, rehabilitation services, and special care services for people with special mental needs.

The data available in Estonia do not enable evaluating the actual need for social welfare services, but a growing number of users of institutional services allows to presume that there is a greater need for services that support coping in the home environment and living in the community.

The absence or poor availability of services supporting life in the community and coping in the home environment often forces referring the person to a facility-based and more expensive care service without actually considering the real needs of the person.

Hence, one of the challenges is the shortage of appropriate 24-hour general care services for the elderly and special care services for people with mental disorders. There are also target groups (i.e. elderly people with dementia) who do not have appropriate care options and suitable social services. A necessary legal framework must be created for the provision of such services and relevant services must be provided.

In conclusion, the policy changes in the field of social welfare are related to the improvement of synergy between services and benefits of different areas, the deinstitutionalisation of social services and the redesign of services to correspond to the needs of service users. All activities are carried out within the framework of the Welfare <a href="Development Plan for 2016–2023.

The most significant measures taken in the field of welfare in 2012–2015 were related to changes in the system of rehabilitation services and assistive technology.

In 2016, the organisation of assistive technology was restructured into a national system instead of a county-based one, which simplified and improved the availability of assistive technology. To increase people's engagement in public life, support learning, and develop the prerequisites for acquiring or restoring the ability

-

frequent among older people. In 2014, the most deaths caused by the abovementioned factors occurred in the age groups of men aged 60–64 years and women aged 85 or older. Source: report of the injuries working group

¹⁴ Internal Security Development Plan 2015–2020, Road Safety Programme 2015–2025, National Health Plan 2009–2020

to work to a certain extent, changes to the national rehabilitation system were also implemented. In addition to medical rehabilitation, rehabilitation services also include social and work-related rehabilitation.¹⁵.

In 2016, the new <u>Social Welfare Act</u> entered into force. It explained in more detail the duties of a local government in providing assistance and organising social services. To unify the quality of services organised by local governments, minimum requirements were established for nine social services organised by local governments.

Special attention is paid to the improvement of accessibility, as well as the promotion of a wider implementation of universal design. Policy changes are supported by the improvement of the quality and supervision of social services, as well as the improvement of the quality of data and analyses necessary for making political decisions. Several activities are implemented with the help of European structural resources.

The absence of social services corresponding to needs increases the care burden of family members. As a result, a Task Force on Relieving the Care Burden was created in 2015 on the basis of clause 10.25 of the Action Programme of the Government Coalition 2015–2019 with the purpose of developing solutions and policy measures for the families with care burden. The Government Office has applied a Rapid Assessment of Estonia Long-Term Care study (it is a first and shortened version) from the World Bank, which serves as a basis for the future activities of the Task Force.

Intergenerational solidarity is maintained and enhanced

In the <u>population survey</u> on intergenerational solidarity conducted in 2009 on the basis of a request by the European Commission, half of Estonians aged 15 and above (52%) found that in Estonia, young and old people do not have enough opportunities to meet and work together in associations and local community initiatives.

According to the survey <u>Volunteering in Estonia</u> (2013–2014) conducted by the Praxis Center for Policy Studies, the participation of Estonian citizens is generally low. Only 31% of the population participated in voluntary work in 2013. The European 50+ population survey SHARE indicated that Estonia has one of the lowest ratings in involvement in voluntary work within the age group of 55+. 4% of the observed age group had participated in voluntary work within the past 12 months.

According to the <u>Survey on the coping of older people and elderly</u> ¹⁶ (2015), 45% of 50–74-year-olds are ready to contribute more to the society through different activities. Hence, there is readiness to contribute through voluntary activities, but voluntary work needs coordination and general awareness raising.

2012 was dedicated to active ageing and intergenerational solidarity in Europe, which is why the themes of the year in Europe were also featured more prominently in Estonia. Several thematic activities for raising general awareness were organised by partner organisations; seminars, conferences and discussions were held.

As an initiative of the Ministry of Social Affairs, a Development Plan for Active Ageing 2013–2020 was addressed to people aged 50 and older. The principles of the development plan were the shaping of attitudes supporting an age-friendly living environment and active ageing, gathering, analysing, and disseminating information on the situation of older people, collaboration between different areas and levels, as well as support of coordinated activities. Unfortunately, the development plan was not carried out, as in 2014, a need arose to create a common strategic basis for the development of policies in different fields (work, social protection, gender equality, and equal treatment). For this reason, the actions were included in the Welfare Development Plan 2016–2023, which features, among other things, collaboration with communities, institutions, and between sectors, but also including interest groups and empowering communities as one of its principles.

_

¹⁵ Social rehabilitation is designated for all disabled people and people with partial or absent ability to work who need daily assistance in coping with the restrictions posed by the their disability or special need. Work-related rehabilitation services are meant for people aged 16 until pensionable age and are mediated by the Estonian Unemployment Insurance Fund.

¹⁶ Summary in English available at pages 25-30

The state's support for voluntary action is manifested by the acknowledgment and appreciation of volunteers, as well as by project-based grants. The annual acknowledgement event organised by the Minister of Social Protection¹⁷ can be brought as an example, as the purpose is to acknowledge active and exemplary older people who have served as a role model for their peers and the community. Traditionally, at least two people from each county are acknowledged.

The development of NGOs is supported by the <u>National Foundation of Civil Society</u> (NFCS), which is in the jurisdiction of the Ministry of the Interior. The purpose of the foundation is to strengthen civil society. The NFCS organises calls for proposals, supports activities that help NGOs develop, and facilitates international collaboration between NGOs.

The Estonian Civil Society Development Plan 2015–2020 (available in Estonian only) establishes viable NGOs and engaged citizens as its general goal. The promotion of the area of activity is directed towards ensuring the sustainability of all NGOs, facilitating more efficient inclusion and social innovation, and increasing entrepreneurship. NGOs dealing with older people have gained both direct and indirect support within the framework of the development plan's actions, but so far, there have been no calls for proposals or strategic actions that would focus on older people within the field of civil society.

The Council of the Gambling Tax (webpage is available in Estonian only) funds projects of the cultural, educational, and social spheres through calls for proposal and from the gathered gambling tax. One of the council's priorities is to support active ageing, including the design of an age-friendly society and activities that facilitate the quality of life and equal opportunities for older people (including activities based on volunteering).

A significant contribution to raising public awareness has been made by the <u>Praxis think tank</u>, an independent non-governmental organisation that acts in public interests. Praxis has organised series of political seminars for policymakers and NGOs, issued, in addition to surveys, publications on older people, and participated in international projects. The <u>MoPact</u> (2014–2017) project is an initiative that could be highlighted, as through collaboration between nearly thirty research institutions across Europe, the project collects the best examples of harnessing the potential of older people in different areas of life and shares these with the general public.

It is important to note that the committee for policies regarding older people operating within the Ministry of Social Affairs has set an objective for 2016 to develop proposals for the Minister of Social Protection that would facilitate the voluntary work done by older people.

Additionally, all local governments have contributed to improving the quality of life of older people, their involvement, and strengthening intergenerational cohesion. All local governments have created opportunities for older people to engage in leisure activities by supporting the organisations of elderly people financially or by providing to the organisations and day centres rooms to operate in. Almost all cities and rural municipalities have roads for non-motorised traffic built with the help of EU's structural resources, which have significantly improved the opportunities of older people to be physically active.

Although there are relatively few examples in Estonia of the inclusion of older people in social life and of intergenerational collaboration, it is possible to highlight some known examples of good practice:

- A non-profit organisation <u>MTÜ Pelgulinna Selts</u> (webpage available in Estonian only) operating in Tallinn launched the activity of companions in 2004. The purpose of the activity is to spend time with and offer companionship to single and disabled people in an attempt to maintain their contact with the society. Another important goal is to maintain the social engagement of the older people who acted as the companions by creating opportunities for communication and engagement in hobbies.
- A social enterprise MTÜ TEEME (webpage available in Estonian only) operating in Viljandi County has developed the provision of social services in a rural area through voluntary work and different projects.

-

¹⁷ The theme of the 2016 acknowledgement event was "Intergenerational Collaboration"; for 2015, "Lifelong Learning"; for 2014, "Activity and Voluntary Action"; for 2013, "Facilitators of Voluntary Action"; for 2012, "Active Ageing and Intergenerational Cohesion".

The development of the companionship service in the city of Viljandi and the companionship service for single elderly persons living in rural areas are noteworthy.

- The Self-Help and Advisory Association for Senior Citizens operating in Tallinn runs on donations and voluntary work. The association includes nearly 5,00 older people who themselves organise activities, are responsible for managing the building, and for offering social support to the members of the association. The association has created a Grandparents' Fund with the purpose of valuing intergenerational cohesion. As of 2008, a project for the support of orphans is carried out to support children who have become orphans or have been left without parental care, and the grandparents who raise these children. The association's members also visit single peers living in Harju County (in residential care homes) as their support persons.
- <u>Eakate Avahoolduskeskus</u> (webpage available in Estonian only) located in Pärnu provides home care and social transportation services to the senior citizens of the city and has joined the international project "Let's be Active", where international experiences are exchanged about the inclusion of elderly people in voluntary work. The project allows raising the awareness of older people on the alternative options for continuing an active life once they retire.

In 2015, the Tallinn University conducted a survey funded by the Council of the Gambling Tax to map community-based activities that support the coping of elderly people living alone. The survey indicated that collaboration between local governments and community initiatives is random, but signs of improvement are visible in several places. As mentioned before, local governments support the participation of elderly people in cultural life to some extent (e.g. by paying the transportation costs of outings) or social interaction (e.g. by providing free spaces for celebrating special occasions).

It appears though that the collaboration between the community and the local government is not yet systematic everywhere, which points to the need to develop a collaboration network between the communities and local governments. The fact that common activities in hobby courses were most often highlighted as best practices while offering mutual help and providing assistance was more modestly represented shows that the voluntary activity of older people has not gained momentum just yet.

2. Conclusions and priorities for the future

The population of Estonia is ageing and in decline but at the same time, the life expectancy of residents has increased and people stay healthy for longer. These trends raise a question about the social and economic development – which changes should be made in different policy areas in order to meet the needs of the economy and the labour market, as well as to ensure a growth in human welfare and the sustainability of the social protection system.

In order to utilise of the Estonian workforce's potential and to ensure the labour market's efficiency, recruiting older employees is essential. To keep the elderly employed, it is important to develop measures for preventing unemployment, such as ensuring the sustainability of work ability, promoting supplemental and re-training, and reacting to redundancies.

In collaboration with the Ministry of Education and Research, principles for lifelong learning shall be established in addition to the compliance of trainings with the needs of the employers. To encourage employment in the retirement age and to prevent dropping out of the labour market, labour market services shall also be provided for jobseekers of retirement age.

Developing pension schemes will also help prevent the elderly from leaving the labour market prematurely. In order to avoid the duplication of activities and the emergence of the so-called grey areas, market labour measures must be better linked to other policy areas (for example, education, business, tax, social, and health policies).

The risk of poverty that is higher for women and increases with age indicates the feminisation of poverty. The main reason for this may be the huge gender pay gap in Estonia, which is also the biggest in the European Union, as well as due the economic inequality between the men and women in Estonia.

Additionally, the notable difference in the life expectancy of men and women, as well as the changes in the structure of the household caused by this, also play a role. The feminisation of poverty refers to the need to assess the gender impact of social protection schemes.

It is needed to develop additional measures and assess the impact on the motivation to work and working activity. The development of all social security schemes must take into account the aspect of financial sustainability and optimality.

The social services and caretaking possibilities that meet people's needs are not sufficiently attainable and quality. The insufficient availability of social services and welfare options that meet people's needs means that the obligation to assist and take care of an elderly person, a disabled person, or a person with special mental needs, often has to be done by a family member or close ones.

The largest proposed policy changes in the domain include finding a solution for the caretaking problem, improving the quality and accessibility to social services, improving collaboration between services and grants of various domains, and establishing a new service system for special care services.

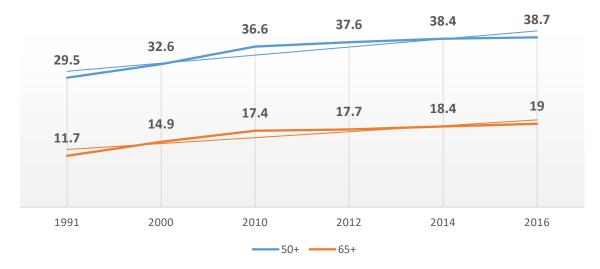
The provision and development of welfare services have moved in the direction of de-institutionalisation and developing support services that are more closely related to the community. The policy changes are supported by the improvement of the quality and supervision of social services and the improvement of the quality of the data and analyses necessary for making policy decisions.

In addition to the abovementioned factors, it is necessary to stress more attention to the use of community resources in preventing and reducing social exclusion, and increase older peoples' involvement in voluntary activities.

Although the challenges related to ageing society are known in Estonia, there is still a strong need to raise general awareness of older people seen as untapped resource for society. However, it is positive that year by year the policy makers take into account the aspects of the changes associated with ageing society. It gives a hope the implementation of older peoples' potential will be substantially increased in near future.

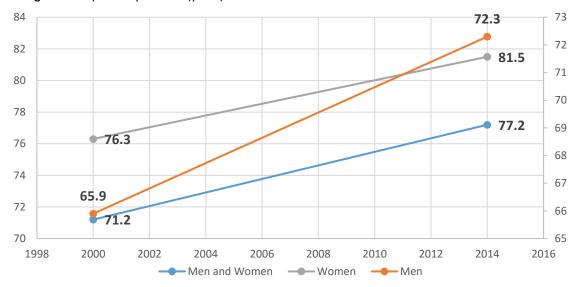
Annexes

Drawing 1. The share of older people in the total population (%), 2016



Statistics Estonia, Calculations done by Ministry of Social Affairs

Drawing 2. Life expectancy at birth (years) 2000-2014



Statistics Estonia, Calculations done by Ministry of Social Affairs

Drawing 3. Healthy life expectancy at birth (years) 2004-2015



Statistics Estonia, Calculations done by Ministry of Social Affairs

Tabel 1. General government expenditure in EU member states, percentage of gross domestic product (GDP), 2011-2015

	2011	2012	2013	2014	2015
Ireland	45.5	41.8	39.7	38.6	35.1
Lithuania	42.5	36.1	35.6	34.8	35.1
Romania	39.1	37.1	35.2	34.3	35.5
Latvia	39.1	37.2	37	37.5	37.2
Estonia	37.4	39.1	38.3	38	39.5
Cypros	42.5	41.9	41.4	48.7	40.1
Bulgaria	34.1	34.7	37.6	42.1	40.2
Luxembourg	43.3	44.6	43.2	42.4	41.5
Poland	43.6	42.6	42.4	42.2	41.5
Chezh Republic	43.2	44.7	42.8	42.8	42.6
United Kingdom	46.6	46.5	44.9	43.8	43
Spain	45.8	48	45.1	44.5	43.3
Malta	41	42.4	42	43.2	43.3
Germany	44.7	44.5	44.5	44.3	43.9
Netherlands	47	47.1	46.3	46.2	45.1
Slovakia	40.5	40.5	41.3	41.9	45.6
Croatia	48.8	47	47.8	48.1	46.9
EU (28 member states)	48.6	49	48.6	48.2	47.4
Slovenia	50	48.6	60.3	49.9	48
Portugal	50	48.5	49.9	51.7	48.3

Sweden	50.5	51.7	52.4	51.7	50.4
Italy	49.1	50.8	51	51.2	50.5
Hungary	49.7	48.6	49.6	49.8	50.7
Austria	50.8	51.1	50.8	52.6	51.7
Belgium	54.4	55.8	55.6	55.1	53.9
Greece	54.2	55.3	62.1	50.7	55.3
Denmark	56.8	58.3	56.5	56	55.7
France	55.9	56.8	57	57.3	56.8
Finland	54.4	56.2	57.5	58.1	58.3

Statistics Estonia

Tabel 2. GDP in current prices and chain-linked volumes per capita, 2004-2015, and ratio of social protection expenditure to GDP (%), 2004-2013

experiantal e to GBT (70), 2004-2013												
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
GDP per capita at current												
market prices	7 125	8 313	10 040	12 118	12 353	10 600	11 054	12 556	13 613	14 427	15 186	15 564
GDP in SKP chain-linked												
volumes per capita												
(reference year 2010)	10 058	11 064	12 273	13 284	12 598	10 764	11 054	11 929	12 592	12 835	13 243	13 383
B												
Ratio of social protection												
expenditure to GDP, %	13	12.5	12.1	12.1	14.9	19	17.8	16.1	15.3	15		

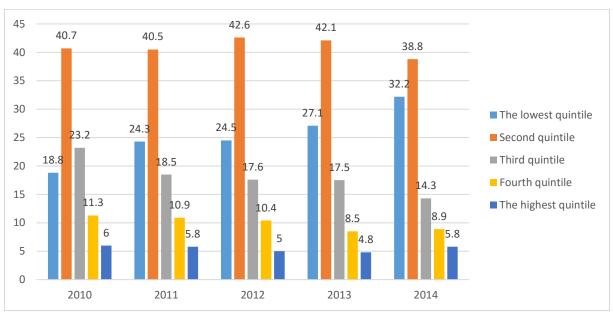
Statistics Estonia

Tabel 3. Labour market indicators (aged 55-64 years), 2008-2015

	2008	2009	2010	2011	2012	2013	2014	2015
55-64 total, thousand	153,7	157,6	162,5	167,6	169,6	170,6	171,1	171,2
incl. employed, thousand	95,4	95	87,4	96,2	102,3	106,7	109,4	110,4
unemployed, thousand	4,1	9,8	17,0	12,6	7,9	6,9	6,3	7,1
inactive, thousand	54,2	52,8	58	58,8	59,4	57	55,4	53,7
Employment rate, % Total	62,1	60,3	53,8	57,4	60,3	62,5	64,0	64,5
men	64,4	59,3	51,9	56,9	58,8	61,3	65,1	63,1
women	60,3	61,1	55,3	57,8	61,5	63,6	63	65,6
Unemployment rate, % Total	4,1	9,3	16,3	11,6	7,2	6,0	5,4	6,0
men	5,3	11,9	19,3	14,8	9,4	8,2	5,8	6,9
women	3,1	7,3	14,0	9,0	5,4	4,4	5,1	5,4

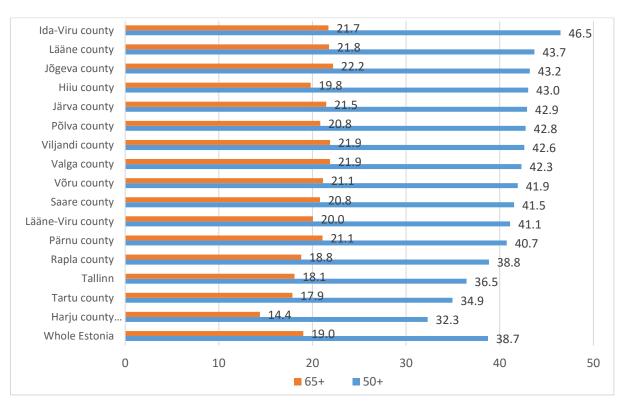
Statistics Estonia, Estonian Labour Force Survey, Calculations done by Ministry of Social Affairs

Drawing 4. The distribution of 65-year and older residents in income quintiles (%), 2010-2014



Statistics Estonia

Drawing 5. The share of older people in the total population by county (%), 2016



Statistics Estonia, Calculations done by Ministry of Social Affairs